

Application for a Water Right Permit



Follow the attached instructions. Attach additional sheets as necessary.

- ☐ GROUND WATER ☒ SURFACE WATER
☒ PERMANENT ☐ SHORT TERM ☐ TEMPORARY
☐ DROUGHT

***A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.**

Section 1. APPLICANT

☒ I have participated in a pre-application conference with Ecology. CABIN OWER

Applicant/Business Name: <u>SOUTH FIRST KACHES SUMMER HOMES</u>	Phone No: <u>425 2556884</u>	Other No: <u>509 656 2251</u>
Address:		
City:	State:	Zip:
Email Address (if available):		

Contact Name (if different from above): <u>ARTHUR W WHITHAM</u>	Phone No: <u>425 2556884</u>	Other No: <u>509 656 2251</u>
Relationship to Applicant:		
Address: <u>7038 123RD AVE. S.E.</u>		
City: <u>NEWCASTLE</u>	State: <u>WASH.</u>	Zip: <u>98056-1215</u>
Email Address (if available): <u>GRANDPA HARLEY @ AOL.COM</u>		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: <u>Arthur W Whitham</u>	Phone No: <u>425 2556884</u>	Other No: <u>509 656 2251</u>
Address: <u>7038 123RD AVE SE</u>		
City: <u>NEWCASTLE</u>	State: <u>WASH</u>	Zip: <u>98056-1215</u>
Email Address (if available): <u>ONE WORD NO SPACE</u> <u>GRANDPA HARLEY @ AOL.COM</u>		

For Ecology Use	APPLICATION NO: <u>54-35666</u>	SEPA: Exempt/Not Exempt
	Fee Paid: <u>0</u> Check No: <u>0</u>	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____ By _____ Priority Date <u>01-08-2014</u> By <u>[Signature]</u> WRIA: _____		
Pre-application interviewer: _____		

Section 2. STATEMENT OF INTENT

Do you own the land on which the proposed point of diversion/withdrawal is located? ☐ YES ☒ NO
If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO

Briefly describe the purpose of your proposed project: EXISTING WATER SOURCE

Anticipated length of time to complete your project: Completed

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS) <input type="checkbox"/> Gallons per Minute (GPM)		
<u>DOMESTIC & MULTIPLE</u>		<u>1/2</u>	<u>MID MAY TO MID OCT.</u>
TOTAL:		<u>1/2</u>	

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☒ YES ☐ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: 05/15/1 TO: 10/15/1

Section 3. POINT OF DIVERSION OR WITHDRAWAL

(Complete A or B, and C below)

A.) If Surface Water Source	B.) If Ground Water Source
<input type="checkbox"/> Spring <input checked="" type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: <u>THETIS CREEK</u>	Well diameter & depth: _____
Tributary to: <u>LAKE KALHES</u>	Number of proposed points of withdrawal: _____
Number of proposed diversion points: <u>6</u>	Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have an existing diversion? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test. Well Tag ID No. _____

That part of the N.W. $\frac{1}{4}$ or the N.W. $\frac{1}{4}$, Section 5, Township 21, N. Range 13 E.W.M. situate in the vicinity of Lake Kachess, Kittitas County, Washington.

Described by metes and bounds as follows:

Beginning at a point, which point is South $0^{\circ} 05'$ East for 604.61 feet from the Northwest corner of said S 5 - T 21 N - R 13 E, thence South $74^{\circ} 00'$ East for 169.49 feet, thence South $25^{\circ} 32'$ West for 70.28 feet, thence North $74^{\circ} 00'$ West for 137.85 feet, thence North $0^{\circ} 05'$ West for 72.14 feet to point of beginning.

Containing 0.24 acres, more or less.

Also described as:

Tax 2, Lot 2; Section 5; Township 21; Range 13; CD. #5689-B

138 feet (☐ North/☒ South) and feet (☐ East/☐ West)

from the (☐ NW ☐ SW ☐ NE ☐ SE ☐) corner of Section 6

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

39
LIT

12. LEGAL DESCRIPTION OF PROPERTY on which water is to be used, for all purposes other than Municipal Supply or Power (Copy legal description from deed) A TRACT OF LAND ON WEST HALF OF NW $\frac{1}{4}$ IN SECTION 5, T21N, R13E, W.M. BORDERED ON N BY THETIS CREEK - ON E BY HIGH WATER LINE OF LAKE KACHESS - RUN W BY SEC 5 & 6 LINE - COMING TO A POINT APPROX 600 FT SOUTH OF THETIS CREEK

If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO

Provide owner name(s), address, and phone number: BARB ANAAN HOWE 509 656 2203, DAN PLOUSE 509 656 0306, MERRIE WINKLE 206 747 1950, BRIAN COLE 509 453 1498, BRUCE WHITEMAN 509 547 0833

Are there any other water rights or claims associated with this property or water system? ☒ YES ☐ NO

If yes, provide the water right and/or claim numbers: COURT CLAIM # 00302

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): EXISTING

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: <u>7</u>	Present population to be served water: _____
Type of connections: <u>RECREATIONAL CABIN</u> (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: _____	
Name of water system: <u>SOUTH FIRST KACHESS SUMMER HOME</u>	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = _____ ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

N/A

Is the proposed project for a dairy farm? ☐ YES ☐ NO

Other Proposed Farm Uses

Describe all proposed uses: _____

N/A

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

N/A

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

N/A

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: I-90 EXIT 62
LAKE ILAKES TO BAKER LAKE CABIN LOCATION
#291 (ART WHITHAM)

Site Address: LAKE ILAKES - South First ILAKES
SUMMER HOME - CONTACT ART WHITHAM

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

ARTHUR W. WHITHAM
Print Name
(Applicant or authorized representative)

Arthur W. Whitham
Signature

2 Jan 18
Date

ARTHUR W. WHITHAM
Print Name
(Legal Owner or Part Owner Place of Use)

Arthur W. Whitham
Signature

2 Jan 2014
Date

ARTHUR W. WHITHAM
Print Name
(Legal Owner or Part Owner Place of Use)

Arthur W. Whitham
Signature

2 Jan 2014
Date

Please check the region in which the project is located:

<p>*Submit your application to:</p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input checked="" type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872.
Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

